Original - Court 1st copy - Plaintiff 2nd copy - Defendant 3rd copy - Friend of the Court

Approved, SCAO

STATE OF MICHIGAN
JUDICIAL CIRCUIT

.Δ	SF	NO	

COUNTY	SUPPORT ENFORCEMENT ORDER	₹
Friend of the Court address		Telephone no.
Plaintiff's name, address, and tele	phone no.	
Attorney:	1. Da	te of Hearing:
V	Ju	dge/Referee:
Defendant's name, address, and t	elephone no.	
		Bar no.
Attorney:		
Further Hearings: \$ Other: \$ Total Costs: \$	gs on the record. nsent. ant is not in contempt. ant failed to appear as ordered. eding are as follows:	
□ b. failure to exercise due diligen	ant is in contempt of court for: available resources all or some portion of the ce so that s/he could have the capacity to pealth care coverage for the child(ren).	
IT IS ORDERED: 7. A bench warrant shall issue for	☐ plaintiff's ☐ defendant's arrest with	h a \$ cash appearance bond
which includes \$	for the costs of this hearing, issuance of	a bench warrant, and arrest.
8. The hearing on the bench w	varrant	to
Reason:		
	rged authorization for bench warra	ant is set aside.
☐ 10. The order to show cause is set		

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Approved, SCAO

STATE OF MICHIGAN JUDICIAL CIRCUIT COUNTY

SUPPORT ENFORCEMENT ORDER

CASE NO.

Friend of the Court address					Telephone no.		
Plaintiff's name		v	Defendant's name				
☐ 11. ☐ Plaintiff ☐ Defendant is	assessed costs of	\$, payable	to the f	riend of the court.		
☐ 12. Cash appearance bond in the a	amount of \$		is forfeited and s	shall be transmitted t	o the friend of the		
court to be applied to the suppo	ort account. \$		shall be refur	nded to the payer.			
☐ 13. The payer shall submit to the freefforts to find employment and a							
on	A ben	ch warrant fo	or arrest may be issu	ued for failure to com	ıply.		
☐ 14. Beginning	4. Beginning the payer shall pay \$ monthly. This sum is:						
\$ for child su	pport, \$		for overdue supp	oort, \$	for uninsured		
medical expenses, \$	for s	service fees,	and \$	for othe	r.		
☐ 15. ☐ Plaintiff ☐ Defendant shall been obtained/maintained.	I provide proof to fi	riend of court	within	_ days that health ca	are coverage has		
☐ 16. The friend of the court shall not health care coverage and to de		employer, in	surer, or plan admi	nistrator to enroll the	child(ren) for		
☐ 17. Income withholding in the amount	unt of \$	mo	nthly shall start imm	nediately.			
 □ 18. The payer shall be committed to the county sheriff, friend of the friend of the court. 19. Both parties shall notify the friend residence address and telephone in c) the health care coverage availar maintenance organization; the pole covered; d) their occupational or dried overed; d) their occupational or d) their occupatio	of the court in writing umber; b) the name of the to them; the name of the tothem; and eight of the tothem of the to	f the court as ng, within 21 e, address, and me of the instant contract numb) their social so pended unlesseration of law than the peri	days of the change and telephone number urance company, her; and the names a security number unless there is compliance, and real and person odic support payment.	sum shall be applied f, of any change in: a er of their employer or ealth care organizate and birth dates of the ess exempt by law und e with an order for pay onal property can be ents payable for two	as directed by the a) their mailing or source of income; ion, or health a persons who are der MCR 552.603. Iment of arrearage. encumbered or months under the		
Date		Judge					
Plaintiff signature	D	ate Defer	dant signature		Date		